STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

NEW HAMPSHIRE Michael McLaughlin **DEPARTMENT OF STATE** I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: (Name of partnership, firm or corporation) 603 226 9600 III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. July 26, 2017 \Box IV. Date of Report April 26, 2017 activity from 4/1/17 to 6/30/17 activity from date of registration 1/3/31/17 Reports cover: January 31, 2018 🗌 October 25, 2017 activity from 7/1/17 to 9/30/17 activity from 10/1/17 to 12/31/17 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: ☐ If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. 10/26/17 (Date) MICHALL MUAUS

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

, I. Name of Lobbyist(s) Michael McMyhlim		
II. Name of lobbyist's partnership, firm or corporation, if any: (Name of partnership, firm or corporation)		
III. Name of Client AIISTATE TUSCHANCE CO.	Date 10/35/17	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations services	
a) Total of all fees received in this reporting period	a)\$ 12.399 —	
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ 37/97 — vear)	
c) Total of all fees received to date (Add lines a and b)	c) \$ 49596 -	
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ p	
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office of individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lobeing lobbied, purchase of a ceremonial object given to a person being lobbic (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	may be filed for the lobbyist(s)/firm he aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses paid expenses; (b) the aggregate total of all ple: meals purchased during a business than \$10 that is given to the person fied with a value of \$25.00 or less); and corting period of greater than \$25.00 for lue of greater than \$25, purchase of ter than \$25, but not greater than \$50 s, expense reimbursement, or political	

- a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.
- b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.
- c) Total of all itemized expenditures reported in detail in section VI.



d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	s
	\$
	s
	\$
	\$
	\$
	•
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of lobbyist)	/0/25/17 (Date)
Michael McHaughlin (Print Name of lobbyist)	